

1 EDMUND G. BROWN JR.
Attorney General of California
2 GLORIA A. BARRIOS
Supervising Deputy Attorney General
3 LINDA L. SUN
Deputy Attorney General
4 State Bar No. 207108
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 897-6375
6 Facsimile: (213) 897-2804
Attorneys for Complainant

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8 **BEFORE THE**
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
9 **STATE OF CALIFORNIA**

10 In the Matter of the Accusation Against:

Case No. **2010-244**

11 **KRISTEN NOEL VOELKER**
12 **1105 Sepulveda Blvd., C-103**
13 **Torrance, CA 90502**

A C C U S A T I O N

14 **Registered Nurse License No. 611593**

15 Respondent.

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17 Complainant alleges:

18 **PARTIES**

19 1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her
20 official capacity as the Interim Executive Officer of the Board of Registered Nursing (Board),
21 Department of Consumer Affairs.

22 2. On or about January 9, 2003, the Board of Registered Nursing issued Registered
23 Nurse License Number 611593 to Kristen Noel Voelker (Respondent). The Registered Nurse
24 License was in full force and effect at all times relevant to the charges brought herein and will
25 expire on October 31, 2010, unless renewed.

26 **JURISDICTION**

27 3. This Accusation is brought before the Board under the authority of the following
28 laws. All section references are to the Business and Professions Code unless otherwise indicated.

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9. California Code of Regulations, title 16, section 1443.5 states:

"A registered nurse shall be considered to be competent when he/she consistently demonstrates the ability to transfer scientific knowledge from social, biological and physical sciences in applying the nursing process, as follows:

"(1) Formulates a nursing diagnosis through observation of the client's physical condition and behavior, and through interpretation of information obtained from the client and others, including the health team.

"(2) Formulates a care plan, in collaboration with the client, which ensures that direct and indirect nursing care services provide for the client's safety, comfort, hygiene, and protection, and for disease prevention and restorative measures.

"(3) Performs skills essential to the kind of nursing action to be taken, explains the health treatment to the client and family and teaches the client and family how to care for the client's health needs.

"(4) Delegates tasks to subordinates based on the legal scopes of practice of the subordinates and on the preparation and capability needed in the tasks to be delegated, and effectively supervises nursing care being given by subordinates.

"(5) Evaluates the effectiveness of the care plan through observation of the client's physical condition and behavior, signs and symptoms of illness, and reactions to treatment and through communication with the client and health team members, and modifies the plan as needed.

"(6) Acts as the client's advocate, as circumstances require, by initiating action to improve health care or to change decisions or activities which are against the interests or wishes of the client, and by giving the client the opportunity to make informed decisions about health care before it is provided."

COST RECOVERY PROVISION

10. Code section 125.3 provides, in pertinent part, that the Board may request the administrative law judge to direct a licensee found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

1 **DRUG DEFINITION**

2 11. Heparin Flush IV is an anticoagulant used to keep intravenous (IV) catheters open
3 and flowing freely. Heparin helps to keep blood flowing smoothly and from clotting in the
4 catheter by making an anti-clotting protein in the body work better.

5 **SUMMARY OF FACTS**

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7 12. Since about February 2003, Respondent was employed as a registered nurse in the
8 Pediatrics Unit (4NE) at Cedars-Sinai Medical Center (CSMC), Los Angeles. On or about
9 November 18, 2007, while working as the Charge Nurse at 4NE, Respondent duties included
10 overseeing and assisting other nurses in the unit with their patient load. Respondent's shift was
11 from 7 p.m. to 7 a.m. On November 18, 2007, Patient #1 and Patient #2, twins, were housed in
12 the same room and were assigned to Nurse Shetty. Patient #1 was a 9-day old female infant
13 admitted to 4NE on November 17, 2007 with a rash. Physician's order was for Acyclovir every 8
14 hours IV, and Vancomycin every 8 hours IV. Patient #2 was a 9-day old male infant admitted to
15 4NE on November 17, 2007 with a rash. Physician's order was for Acyclovir every 8 hours IV,
16 and Vancomycin every 8 hours IV.

17 13. On November 18, 2007, shortly after her shift began, Respondent was informed that
18 there was noticeable oozing from both Patients #1 and #2's IV sites. Respondent advised Nurse
19 Shetty to continue to monitor the patients.

20 14. At about 0745 hours, Respondent heard the IV pumps from either Patient #1 or #2
21 beep, indicating that the medication that was being given was completely infused. Per hospital
22 protocol, Heparin Flush 10 units per milliliter is to be administered after the administration of IV
23 medications. Respondent turned off the pump and proceeded to the medication room to obtain
24 and prepare a Heparin Flush dose. Respondent obtained a Heparin vial where the Heparin 10
25 units per milliliter were stored, but did not recall if she verified the correct dosage and expiration
26 of the drug. She prepared the Heparin Flush in a syringe and placed an orange label on the
27 syringe, which was used to identify that it was Heparin Flush as opposed to saline flush. The
28 label did not include the patient's name, dosage, concentration amount, date or time. Respondent

1 advised Nurse Shetty that the patient's medications were completely infused and needed to be
2 flushed. She handed the Heparin Flush syringe to Shetty for administration, and began to prepare
3 another Heparin Flush for the other twin patient. Respondent did not document her preparation of
4 the Heparin Flush anywhere in the hospital records.

5 15. At about 2115 hours, Respondent was informed that the oozing from Patients #1 and
6 #2's IV sites continued. At 2240 hours, the Heparin drawer was discovered to contain Heparin
7 vials 10,000 units per milliliter. Laboratory tests conducted that day revealed that Patients #1 and
8 #2 were overdosed with Heparin. On November 19, 2007, two doses of a Heparin reversal
9 antidote, Protamine Sulfate 25mg, were administered to both patients.

10 FIRST CAUSE FOR DISCIPLINE

11 (Gross Negligence)

12 16. Respondent is subject to discipline under Code section 2761, subdivision (a)(1) on the
13 grounds of unprofessional conduct as defined under California Code of Regulations, title 16,
14 section 1442, in that on or about November 18, 2007, while on duty as a Charge Nurse at 4NE at
15 CSMC, Respondent was grossly negligent in the following respects:

- 16 a. Patient #1 or Patient #2. At about 1945 hours, Respondent drew up a Heparin Flush
17 solution into a syringe and could not recall if she had checked the vial for the correct
18 medication, concentration or expiration date. Complainant refers to and incorporates all
19 the allegations contained in paragraphs 12 – 15, as though set forth fully.
- 20 b. Patient #1 or Patient #2. At about 1945 hours, Respondent drew up a Heparin Flush
21 solution into a syringe but did not verify the correct medication, concentration, route or
22 absence of discoloration or particulate matter with another nurse who administered the
23 drug. Complainant refers to and incorporates all the allegations contained in paragraphs
24 12 – 15, as though set forth fully.

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PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

1. Revoking or suspending Registered Nurse License Number 611593, issued to Kristen Noel Voelker;
2. Ordering Kristen Noel Voelker to pay the Board of Registered Nursing the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3;
3. Taking such other and further action as deemed necessary and proper.

DATED: _____

11/3/09

Louise R. Bailey
LOUISE R. BAILEY, M.ED., RN
Interim Executive Officer
Board of Registered Nursing
Department of Consumer Affairs
State of California
Complainant

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